10/6/3,172

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

LKMP: 112 US

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

		CLAIMS AS	FILED -	9	SMALL ENTITY			OTHER	THAN			
			(Column 1)		(Column 2)			TYPE		OR	SMALL	
TOTAL CLAIMS			7.8				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			2 Sminus 20=		. 8			X\$ 9=		OR	X\$18=	144
INDEPENDENT CLAIMS			2 minus 3 =		-			-X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in col						column 2		TOTAL		OR	TOTAL	894
CLAIMS AS AMENDED - PART II										J.	OTHER	
_		(Column 1)	Y	(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 28	Minus	d		=		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MI	Minus	PENDENIA				X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
	TOTAL ADDIT, FEE									OR	TOTAL ADDIT, FEE	
-					•	ADDII. 1 CC1						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	NITATION OF M	Minus	***		=		X42=		OR	X84=	
<u> </u>	rinsi Prese	NTATION OF MI	JENPLE DE	PENDENI	CLAIM]	+140=		OR	+280=	1
	TOTAL ADDIT. FEE									OR	TOTAL	
		, ,	NOUTH, FEE I			ADDIT. FEE						
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	Jſ	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X42=			X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┚┞			OR	7.5	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. If "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
	The "Highest Num	ber Previously Pa	id For" (Total o	r Independ	ent) is the	e highest numb	er foui	nd in the app	ropriate box	in co	umn 1.	

*U.S. Government Printing Office: 2003 — 498-278/69151

FORM PTO-875 (Rev. 12/02)